

# ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☐ Ms.

☒ yes ☐ no

☐ Mr. Artist

DONNA

WEBB

(Last Name Last)

Permanent  
Address

729 Chitty Ave

AKRON

Street

City

44303

Tel. ( )

216 836-7138

Zip

Area Code

Temporary or  
Studio Address

Street

City

Tel. ( )

Zip

Area Code

If you do not presently live in one of the counties of the  
Western Reserve, which county were you born in? \_\_\_\_\_

Collaborator \_\_\_\_\_

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist C.O.D. at this address:

## Special Instructions

When necessary include below instructions or a drawing of how  
the object is to be assembled and displayed.

Donna Webb

This entry blank must be fully made out and signed. Unsigned  
entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is  
understood that the Museum will have the right to dispose for  
its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on  
exhibition until May 13, 1979.

The submission of objects will be construed as acceptance of all  
conditions printed in the entry information.

Signature

Donna Webb

# ENTRY BLANKS

1

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography
 ☐ 4. Sculpture
 ☐ 5. Electric
 ☒ 6. Crafts

Materials

CLAY

Title

TOM'S BIRTHDAY EXTRAVAGANZA

Price or NFS

NFS

Insurance Value  
if NFS Only

\$300.00

Size

25" high 13" wide

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.  
For Sale

Total No. in Edition

Price  
Unframed

Price of  
Frame

ACCEPTED

REJECTED

DO NOT WRITE IN THIS SECTION

18 (PP)

ACCEPTED

REJECTED

2

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography
 ☒ 4. Sculpture
 ☐ 5. Electric
 ☐ 6. Crafts

Materials

CLAY

Tommy Webb

Title

TRANSFORMATION IV

Price or NFS

200.00

Insurance Value  
If NFS Only

Size

15" X 14.5" X 2.5"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price  
Unframed

Price of  
Frame

ACCEPTED

REJECTED

DO NOT WRITE IN  
THIS SECTION

19 (PP)

ACCEPTED

REJECTED

RECEIVED

DATE

THI WWC  
2/12/3/14

DO NOT DETACH

1979 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

Dates for Pick-up of Objects

Rejected Objects: April 2 through 7

Accepted Objects: May 21 through 26

DONNA WEBB

Name

729 CHITTY AVE

Address

AKRON, Ohio

City & State

44303

Zip

2-1

DO NOT DETACH



NOTIFICATION CARD #2

1

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography  
☐ 4. Sculpture ☐ 5. Electric ☒ 6. Crafts

Title

TOMS BIRTHDAY EXTRAVAGANZA

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

18 (PP)

X

2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography  
☒ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Title

TRANSFORMATION IV

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

19 (PP)

X

This is your only receipt to claim your object(s).

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.